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DATE: November 6, 2003	URGENCY: <input type="checkbox"/> SUPER RUSH <input checked="" type="checkbox"/> RUSH <input type="checkbox"/> REGULAR
FAXED BY: Pam Turnbough	FILE #: 085337/00009 CLIENT NAME: CP 102

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**MESSAGE:****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Jane C. Hirsh, Kamal K. Midha, and Whe-Yong Lo

Serial No.: 09/858,016 Art Unit: 1616

Filed: May 15, 2001 Examiner: Sharmilas Gollamudi

For: **PHARMACEUTICAL COMPOSITION FOR BOTH INTRAORAL AND ORAL ADMINISTRATION**

# 1347667\_v1

PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0951-0031

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/858,016	
	Filing Date	May 15, 2001	
	First Named Inventor	Jane C. Hirsh	
	Art Unit	1616	
	Examiner Name	S. S. Gollamudi	
Total Number of Pages in This Submission	24	Attorney Docket Number	CP 102

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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Firm or Individual name	Patrea L. Fabst, Reg. No. 31,284 Holland & Knight LLP	
Signature	Suite 2000, One Atlantic Center, 1201 West Peachtree Street, N.E., Atlanta, GA 30309-3400	
Date	12/3/03	

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**FEE TRANSMITTAL  
for FY 2004**

Effective 10/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$).00

**Complete if Known**

Application Number	09/858,016
Filing Date	May 15, 2001
First Named Inventor	Jane C. Hirsh
Examiner Name	S. S. Gollamudi
Art Unit	1616
Attorney Docket No.	CP 102

**METHOD OF PAYMENT (check all that apply)**☐ Check ☐ Credit card ☐ Money Order ☐ Other ☒ None☐ Deposit Account:Deposit  
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☐ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 830	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
<b>SUBTOTAL (1)</b>			<b>(\$).00</b>

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	Extra Claims	Fee from below	Fee Paid
25	25** =	X	
Independent Claims	2	2** =	X
Multiple Dependent			

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1202 16	2202 9	Claims in excess of 20	
1201 86	2201 43	Independent claims in excess of 3	
1203 290	2203 145	Multiple dependent claim, if not paid	
1204 86	2204 43	** Reissue independent claims over original patent	
1205 16	2205 9	** Reissue claims in excess of 20 and over original patent	
<b>SUBTOTAL (2)</b>			<b>(\$).00</b>

\*\*or number previously paid, if greater. For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65			Surcharge - late filing fee or oath	
1052 50	2052 25			Surcharge - late provisional filing fee or cover sheet	
1053 130	2053 130			Non-English specification	
1812 2,520	2812 2,520			For filing a request for ex parte reexamination	
1804 920*	2804 920*			Requesting publication of SIR prior to Examiner action	
1806 1,840*	2806 1,840*			Requesting publication of SIR after Examiner action	
1251 110	2251 55			Extension for reply within first month	
1252 420	2252 210			Extension for reply within second month	
1253 850	2253 475			Extension for reply within third month	
1254 1,480	2254 740			Extension for reply within fourth month	
1255 2,010	2255 1,005			Extension for reply within fifth month	
1401 330	2401 165			Notice of Appeal	
1402 330	2402 165			Filing a brief in support of an appeal	
1403 280	2403 145			Request for oral hearing	
1451 1,510	2451 1,510			Petition to institute a public use proceeding	
1452 110	2452 55			Petition to revive - unavoidable	
1453 1,330	2453 665			Petition to revive - unintentional	
1501 1,330	2501 665			Utility issue fee (or reissue)	
1502 480	2502 240			Design issue fee	
1503 640	2503 320			Plant issue fee	
1480 130	2480 130			Petitions to the Commissioner	
1807 50	2807 50			Processing fee under 37 CFR 1.17(q)	
1806 160	2806 160			Submission of Information Disclosure Sheet	
8021 40	28021 40			Recording each patent assignment per property (times number of properties)	
1809 770	2809 385			Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385			For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385			Request for Continued Examination (RCE)	
1802 900	2802 900			Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$).00

**SUBMITTED BY**

Name (Print/Type) Patrea L. Fabst

Registration No.  
(Attorney/Agent)

31,284

(Complete if applicable)

Telephone (404) 817-8473

Signature

Date

12/3/03

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U.S.S.N. 09/858,016

Filed: May 15, 2001

AMENDMENT AND RESPONSE TO OFFICE ACTION

**Certificate of Facsimile Transmission**

I hereby certify that this Amendment and Response to Office Action, and any documents referred to as attached therein are being facsimile transmitted on this date, December 3, 2003, to the Commissioner for Patents, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450.

  
Pam Turnbough

Date: December 3, 2003

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